



OFFICIAL COMMUNICATION

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Facsimile Transmittal

DATE: 06/26/06
TO: Amendment
Commissioner for Patents
ATTN: Examiner: Jia Lu
Art Unit: 2611

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FAX NUMBER: (571) 273-8300

FROM: Andrea L. Mays, Attorney for Applicant
Registration No. 43,721

Total Number of Pages Sent: 8 (including this transmittal cover sheet)

FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 010374

ENCLOSED ARE:

- Amendment (6 pages)
- Transmittal (in duplicate)

APPLICANT: Stein, et al.
ASSIGNEE: QUALCOMM Incorporated
SERIAL NO.: 10/057,689
FILED: January 24, 2002
FOR: PARATMETER ESTIMATOR WITH DYNAMICALLY VARIABLE INTEGRATION TIME

Please contact Victoria J. Pacey at (858) 651-3411 if all pages do not transmit.

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PTO/SB/21

U.S. Department of Commerce
Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 010374
In Re Application of: Stein, et al.
Serial Number: 10/057,689
Filed: January 24, 2002
Examiner: Jia Lu
Group Art Unit: 2611RECEIVED
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Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

| CLAIMS | (a) Number Remaining After Amendment | (b) Highest Number Previously Paid For | (c) Extra Claims | Large Entity Fee | Fee Paid |
|--|--------------------------------------|--|------------------|------------------|----------|
| Total* | | | | x \$50 = | \$ |
| Independent** | | | | x \$200 = | \$ |
| Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | \$360 | \$ |
| EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months | | | | \$120 | \$ |
| | | | | \$450 | \$ |
| | | | | \$1020 | \$ |
| TERMINAL DISCLAIMER | | | | \$130 | \$ |
| | | | | TOTAL FEE | \$ |

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
- The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: June 26, 2006

Signature: Andrea L. Mays, Reg. No. 43,721
Phone No. (858) 651-8546QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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(type or print name)

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- ☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Victoria J. Pacey
(type or print name)Signature: 

(TRANSAMD.VER1.13-04/30/04)

Docket No. 010374

Serial No. 10/057,689

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:
Stein, et al.

For: PARAMETER ESTIMATOR WITH
DYNAMICALLY VARIABLE
INTEGRATION TIME

Serial No.: 10/057,689

Group Art Unit: 2634

Filed: January 24, 2002

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REPLY TO OFFICE ACTION

Asst. Commissioner of Patents
Alexandria, VA 22313

Attention: Jia Lu
Examiner

Dear Sir:

In response to the Final Office Action of April 26, 2006, please reconsider the above-identified application as follows:

Remarks/Arguments begin on page 2 of this paper.

I hereby certify that this correspondence is being sent
via facsimile addressed to the Commissioner of
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June 26, 2006

(Date of Deposit)

Victoria J. Pacey

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